1	LONG-TERM DISABILITY INSURANCE PLAN					
2	AMENDMENTS					
3	2015 GENERAL SESSION					
4	STATE OF UTAH					
5	Chief Sponsor: Margaret Dayton					
6	House Sponsor: Bradley G. Last					
7 8	LONG TITLE					
9	General Description:					
10	This bill modifies the Public Employees' Long-Term Disability Act by amending					
11	provisions relating to long-term disability benefits.					
12	Highlighted Provisions:					
13	This bill:					
14	 authorizes the Utah State Retirement Office to request additional information to 					
15	determine whether an eligible employee has a total disability;					
16	 specifies an appeal procedure for an eligible employee if the Utah State Retirement 					
17	Office denies or terminates a claim for long-term disability benefits;					
18	 provides that when a valid benefit protection contract is in place, a disabled eligible 					
19	employee does not accrue service credit during the period of total disability if the					
20	disabled eligible employee is eligible to retire with an unreduced retirement					
21	allowance;					
22	 amends the amount that a monthly disability benefit is reduced by if an eligible 					
23	employee engages in approved rehabilitative employment;					
24	 provides that the Utah State Retirement Office may refer the eligible employee to a 					
25	rehabilitative or vocational specialist for return to work assistance; and					
26	makes technical and conforming changes.					



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Money Appropriated in this Bill:

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	None					
	Other Special Clauses:					
	None					
	Utah Code Sections Affected:					
	AMENDS:					
	49-21-401, as last amended by Laws of Utah 2012, Chapter 298					
	49-21-406, as last amended by Laws of Utah 2003, Chapter 240					
	Be it enacted by the Legislature of the state of Utah:					
	Section 1. Section 49-21-401 is amended to read:					
	49-21-401. Disability benefits Application Eligibility.					
	(1) An eligible employee shall apply for long-term disability benefits under this chapter					
	by:					
	(a) completing an application form prepared by the office;					
	(b) signing a consent form allowing the office access to the eligible employee's medical					
	records; and					
	(c) providing any documentation or information reasonably requested by the office.					
	(2) (a) If an eligible employee is unable to apply on the employee's own behalf, the					
application may be made by a person who is:						
	(i) the attorney for an eligible employee; or					
	(ii) appointed as a conservator or guardian of the eligible employee.					
	(b) A person described in Subsection (2)(a), may not make an application for a					
deceased employee.						
	(3) Upon request by the office, the participating employer of the eligible employee					
	shall provide to the office documentation and information concerning the eligible employee.					
	(4) The office:					
	(a) shall review all relevant information;					
	(b) may request additional information; and					
	(c) shall determine whether or not the eligible employee has a total disability.					
	(5) If the office determines that the eligible employee has a total disability due to					
	accidental hodily injury or physical illness which is not the result of the performance of an					

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employment duty, the eligible employee shall receive a monthly disability benefit equal to two-thirds of the eligible employee's regular monthly salary, for each month the total disability continues beyond the elimination period, not to exceed the maximum benefit period.

- (6) If the office determines that the eligible employee has a total disability due to psychiatric illness, the eligible employee shall receive:
- (a) a maximum of two years of monthly disability benefits equal to two-thirds of the eligible employee's regular monthly salary for each month the total disability continues beyond the elimination period;
- (b) a maximum of \$10,000 for psychiatric expenses, including rehabilitation expenses preauthorized by the office's consultants, paid during the period of monthly disability benefits; and
- (c) payment of monthly disability benefits according to contractual provisions for a period not to exceed five years if the eligible employee is institutionalized due to psychiatric illness.
- (7) If the office determines that the eligible employee has a total disability due to a physical injury resulting from external force or violence as a result of the performance of an employment duty, the eligible employee shall receive a monthly disability benefit equal to 100% of the eligible employee's regular monthly salary, for each month the total disability continues beyond the elimination period, not to exceed the maximum benefit period.
- (8) (a) Successive periods of disability are considered as a continuous period of disability if the period of disability:
 - (i) results from the same or related causes;

- (ii) is separated by less than six months of continuous full-time work at the individual's usual place of employment; and
 - (iii) commences while the individual is an eligible employee covered by this chapter.
- (b) The inability to work for a period of less than 15 consecutive calendar days is not considered as a period of disability.
- (c) If Subsection (8)(a) or (b) does not apply, successive periods of disability are considered as separate periods of disability.
- (9) The office may, at any time, have any eligible employee claiming to have a disability examined by a physician chosen by the office to determine if the eligible employee

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	90	has a	total	disa	bility.
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(10) A claim brought by an eligible employee for long-term disability benefits under the Public Employee's Long-Term Disability Program is barred if it is not commenced within six months from the eligible employee's date of disability, unless the office determines that under the surrounding facts and circumstances, the eligible employee's failure to comply with the time limitations was reasonable.

- (11) (a) If the office denies or terminates a claim for long-term disability benefits, the eligible employee shall have the right to appeal the denial or termination to the office disability claims review committee within 60 days of the denial or termination of long-term disability benefits.
- (b) An appeal of a denial or termination of long-term disability benefits described in Subsection (11)(a) is barred if it is not commenced within the time limit described in Subsection (11)(a).
- (12) (a) If the office disability claims review committee, after reviewing an appeal denying or terminating long-term disability benefits, denies or terminates a claim for long-term disability benefits, the eligible employee may appeal the office disability claims review committee's denial or termination to the executive director of the office in accordance with Section 49-11-613.
- (b) An appeal of a denial or termination of long-term disability benefits described in Subsection (12)(a) is barred if it is not commenced within 60 days of the office disability claims review committee's denial or termination.
- (c) Following an appeal commenced under this Subsection (12), any further appeal proceedings shall be conducted in accordance with the administrative hearing process described in Section 49-11-613.
- [(11)] (13) Medical or psychiatric conditions which existed prior to eligibility may not be a basis for disability benefits until the eligible employee has had one year of continuous eligibility in the Public Employees Long-Term Disability Program.
- [(12)] (14) If there is a valid benefit protection contract, service credit shall accrue during the period of total disability, unless the disabled eligible employee is:
- (a) exempted from a system[;];
- (b) eligible to retire with an unreduced retirement allowance; or [is]

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121	(c) otherwise ineligible for service credit.
122	[(13)] (15) Regardless of any medical evidence provided by the employee to support
123	the application for disability, an employee is not eligible for long-term disability benefits
124	during any period in which the employee:
125	(a) makes a claim that the employee is able to work; or
126	(b) has a pending action in a court or before any federal, state, or local administrative
127	body in which the employee has made a claim that the employee is able to work.
128	[(14)] (16) Notwithstanding the provisions of Section 49-11-618, upon written request
129	by an employer, information obtained under this part may, upon an order of a court or an
130	administrative law judge, be released to an employer who is a party in an action under
131	Subsection $\left[\frac{(13)}{(15)}\right]$
132	Section 2. Section 49-21-406 is amended to read:
133	49-21-406. Rehabilitative employment Interview by disability specialist
134	Maintaining eligibility Additional treatment and care.
135	(1) (a) If an eligible employee, during a period of total disability for which the monthly
136	disability benefit is payable, engages in approved rehabilitative employment, the monthly
137	disability benefit otherwise payable shall be reduced:
138	(i) by an amount equal to 50% of the income to which the eligible employee is entitled
139	for the employment during the month; and
140	(ii) so that the combined amount received from the rehabilitative employment and the
141	monthly disability payment does not exceed 100% of the eligible employee's monthly salary
142	prior to the employee's disability.
143	(b) This rehabilitative benefit is payable for up to two years or to the end of the
144	maximum benefit period, whichever occurs first.
145	(2) (a) Each eligible employee receiving a monthly disability benefit shall be
146	interviewed by the office.
147	(b) The office may refer the eligible employee to a [disability] rehabilitative or
148	vocational specialist for a review of the eligible employee's condition and a written
149	rehabilitation plan and return to work assistance.
150	(3) If an eligible employee receiving a monthly disability benefit fails to participate in
151	an office-approved rehabilitation program within the limitations set forth by a physician, the

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monthly disability benefit may be suspended or terminated.

(4) The office may, as a condition of paying a monthly disability benefit, require that the eligible employee receive medical care and treatment if that treatment is reasonable or usual according to current medical practices.

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